REMARKS

This application is a national stage filing of PCT/JP2004/004083 filed March 24, 2004. Claims 1-4 were present at the time of filing. Claims 1 and 3 are amended above, claims 2 and 4 are cancelled and new claims 5-7 are presented. Claims 1, 3 and 5-7, therefore, are currently pending in the application.

Support for the amendments are found in cancelled claims 2 and 4 and in the specification, for example, at page 11, first full paragraph.

Rejection Under 35 U.S.C. §103

Claims 1-4 are rejected under 35 U.S.C. §103(a) as being unpatentable over Sawai et al. in view of Arita et al. According to the Office Action, it would have been obvious to one of skill in the art to adapt the latex agglutination assay as taught by Sawai et al., for measurement of adiponectin by using an anti-adiponectin antibody. Applicants respectfully disagree.

Sawai et al. teach a general method of measuring antigens and antibodies using insoluble carrier particles to which the corresponding antibody or antigen is bound. Sawai et al. specifically teach measurement of fibrinogen and hCG using latex particles to which either anti-Fg or anti-hCG antibodies are bound.

Arita et al. disclose a traditional two-antibody ELISA assay for the detection of adiponectin using a monoclonal anti-adiponectin antibody as the capture antibody and a polyclonal anti-adiponectin antibody as the detection antibody. Both polyclonal and monoclonal antibodies were generated against adiponectin, each of which recognized recombinant adiponection as determined by Western blotting. According to Arita et al., the monoclonal ANOC 9108 gave a lower absorbance than expected when plasma samples were directly subjected to the ELISA system. Arita et al. attribute the result to the multimeric formation of adiponectin in plasma. As a result, Arita et al. teaches that plasma samples were boiled with SDS to convert adiponectin to a monomeric form (page 81, columns 1 and 2, RESULTS).

Therefore, in view of the teachings of Arita et al. with respect to the formation of multimeric adiponectin in plasma and the problems encountered by Arita in getting an accurate measurement using anti-adiponectin antibodies, it is unlikely that the skilled artisan would have been motivated to employ an adiponectin antibody in any immuno-based assay to determine adiponectin levels without first treating the sample to be assayed to obtain monomeric adiponectin. Applicants on the other hand were able to obtain an accurate measurement of the level of adiponectin in a biological fluid, like blood or plasma, without the need to pretreat the sample as taught by Arita et al. This advantageous effect of the present invention is unexpected in view of the teachings of the cited references.

There is nothing in the teachings of Sawai et al. and Arita et al., from which those of skill in the art would conclude that the use of polyclonal anti-adiponectin antibodies in a latex particle agglutination assay without predilution or pretreatment of the sample would give an accurate adiponectin measurement. Accordingly, the cited references cannot render the claims obvious.

Withdrawal of the rejection under 35 U.S.C. §103 is respectfully requested.

It is respectfully submitted that the above-identified application is now in condition for allowance and favorable reconsideration and prompt allowance of these claims are respectfully requested. Should the Examiner believe that anything further is desirable in order to place the application in better condition for allowance, the Examiner is invited to contact Applicants' undersigned attorney at the telephone number listed below.

Respectfully submitted,

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